



Community Services Department • Shoreline Division
3070 N. Shoreline Blvd • Post Office Box 7540 • Mountain View, CA 94039-7540 • (650)903-6392 • FAX (650)962-1102

Credit Card Authorization Form

I, _____, authorize Shoreline Division to charge my credit card below:
Print Name

PAYMENT

☐ Visa

☐ MasterCard

Amount: \$ _____

Special Event: 5K/10K Run, Walkathon, Field Trip Fee Per Day \$300

Credit Card # _____ - _____ - _____ - _____

Expiration Date ____ / ____

3-digits on back of card ____

Name as it appears on Credit Card: _____

Address: _____

City/Zip Code: _____

Cardholder Signature: _____ Date: _____

Reference _____

Submit completed form by one of the following:

Mail

Shoreline at Mountain View
3070 N. Shoreline Blvd.
Mountain View, CA 94043

Fax

(650) 962-1102

E-mail

aischa.standingcrow@mountainview.gov

Office Use Status

Transmittal C/R Desc SHRSE